



SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO

APPLICATION FOR THIRD PARTY USE OF COURT FACILITIES

INSTRUCTIONS: Save, attach, and submit this form via email to: desmith@sb-court.org. This email address can only be used to submit this form; any other correspondence will not be processed. Or return completed application to the San Bernardino Superior Court Executive Office – 247 W. Third Street, 11th Floor, San Bernardino, CA 92415. *Attach additional pages if necessary and all supporting documentation.* Submit at 30 days in advance of the desired date of use. See Policy for Third Party Use of Court Facilities for additional information.

1. Contact person: _____ Phone number: _____

Email: _____ Fax number: _____

Address: _____

2. Organization name: _____ Phone number: _____

Email: _____ Fax Number: _____

Organization address: _____

Type of organization: _____

If the organization has a court employee contact, please answer the following:

Employee name: _____ Phone Number: _____

Job title: _____ Court Location: _____

3. Court location requested: Barstow Fontana Joshua Tree Juvenile Delinquency

Juvenile Dependency Rancho Cucamonga San Bernardino Child Support

San Bernardino Historic San Bernardino Justice Center Victorville

Other (Explain): _____

Number of conference rooms requested: _____ Number of courtrooms requested: _____

Will the number of rooms needed change for each day of this request? No Yes (If the number of rooms needed is different for each day of this request, attach a sheet of paper listing each date and the requested number of rooms.)

Is the Jury Room requested: No Yes If "yes," time: (from) _____ a.m./p.m. (to) _____ a.m./p.m.

Any other area of the court requested: _____

Date(s) / Time(s) requested (complete a new form for each month, but if recurring, see below):

Date: _____ Time (from): _____ a.m./p.m. (to): _____ a.m./p.m.

Date: _____ Time (from): _____ a.m./p.m. (to): _____ a.m./p.m.

Date: _____ Time (from): _____ a.m./p.m. (to): _____ a.m./p.m.

Is this request recurring? No Yes If "yes," please explain: _____

4. Expected number of participants: Court employees: _____ Non-court employees: _____

Describe the intended use of the facility: _____

Date: _____

Electronic printed signature

EXECUTIVE OFFICE USE ONLY

Date Received / Initials: ____ / ____

Request for use of facilities is: Denied Granted Granted with modifications or restrictions listed below:

Availability of requested room(s)/courtrooms) to be determined.

Date: _____

Electronic printed signature

Comments:

Requestor to be responsible for any damage, all clean up, and returning room to original configuration.
